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## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\*

NO NH

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

NO NH

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 06/03/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY NC	SHEETS DRAWING 7	TOTAL CLAIMS 21	INDEPENDENT CLAIMS 4
35 USC 119 (a-d) conditions met Verified and Acknowledged	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> yes <input type="checkbox"/> no Met after Allowance Examiner's Signature: <u>NH</u> Initials: <u>NH</u>			

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## TITLE

Method and system of communication between a master device and a slave device

FILING FEE  RECEIVED 874	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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